

REISSUE APPLICATION DECLARATION BY THE ASSIGNEE

Docket Number (Optional)

101-R001

I hereby declare that:

My residence, post office address and citizenship are stated below next to my name.

I am authorized to act on behalf of the following company: SAMSUNG Electronics Co., Ltd.and the title of my position with said company is: Group Manager of Intellectual Property Group

The entire title to the patent identified below is vested in said company.

Name of Patentee(s): Yong-hwan PARKPatent Number 6,324,373

Date Patent Issued

November 27, 2001Title of Invention PRE-TRANSFER SYSTEM IN AN IMAGE FORMING APPARATUSI believe said patentee(s) to be the original, first and sole or joint inventor(s) of the subject matter which is described and claimed in said patent, for which a reissue patent is sought on the invention entitled PRE-TRANSFER SYSTEM IN AN IMAGE FORMING APPARATUS,

the specification of which

 is attached hereto. was filed on _____ as reissue application number n/a _____ and was amended on _____
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

 by reason of a defective specification or drawing. by reason of the patentee claiming more or less than he had the right to claim in the patent. by reason of other errors.

At least one error upon which reissue is based is described as follows:

One error being relied upon as a basis for a reissue is that independent claims 1, 9, and 15 contain unduly limiting features including for example "a lens is disposed opposite to a light emitting portion of the pre-transfer lamp" (claim 1), "a mirror for directing the light from the first light-emitting diode" (claim 9), and "focusing the light into a line pattern" (claim 15). These and other features recited in independent claims 1, 9, and 15 unduly and erroneously limited the scope of patent protection for the invention described in U.S. Patent 6,324,373.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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(REISSUE APPLICATION DECLARATION BY THE ASSIGNEE, page 2)		Docket Number (Optional) 101-R001																									
<p>All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.</p> <p>I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.</p>																											
<p>Name(s) Patrick J Stanzione</p>		<p>Registration Number 40434</p>																									
<p>Seungman Kim</p>		<p>50012</p>																									
<p>Correspondence Address: Direct all communications about the application to:</p>																											
<p><input checked="" type="checkbox"/> Customer Number 38209</p>		<p>→</p>																									
<p><i>Type Customer Number here</i></p>																											
<p>OR</p>																											
<table border="1"> <tr> <td><input type="checkbox"/> Firm or Individual Name</td> <td colspan="3">Patrick J Stanzione</td> </tr> <tr> <td>Address</td> <td colspan="3">1740 N St., N.W., 1st Floor</td> </tr> <tr> <td>Address</td> <td colspan="3"></td> </tr> <tr> <td>City</td> <td>Washington</td> <td>State</td> <td>DC</td> </tr> <tr> <td>Country</td> <td>USA</td> <td>ZIP</td> <td>20036</td> </tr> <tr> <td>Telephone</td> <td>202 775 1900</td> <td>Fax</td> <td>202 775 1901</td> </tr> </table>				<input type="checkbox"/> Firm or Individual Name	Patrick J Stanzione			Address	1740 N St., N.W., 1st Floor			Address				City	Washington	State	DC	Country	USA	ZIP	20036	Telephone	202 775 1900	Fax	202 775 1901
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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.</p>																											
<p>Full name of person signing (given name, family name)</p>																											
<p>Dong-ho Lee</p>																											
<p>Signature</p>		<p>Date</p>																									
<p><i>Dong-ho Lee</i></p>		<p>Nov 25, 2003</p>																									
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REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

101-R001

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 6,324,373, granted November 27, 2001, and for which a reissue patent is sought on the invention entitled

PRE-TRANSFER SYSTEM IN AN IMAGE FORMING APPARATUS

the specification of which

is attached hereto.

was filed on _____ as reissue application number n/a
and was amended on _____
(If applicable)

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I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verify believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)
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All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

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OR

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202 775 1901

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)

Yong-hwan PARK

Inventor's signature

Residence Suwon-city, Korea

Date

11/25/03

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Citizenship

Republic of Korea

Full name of second joint inventor (given name, family name)

Inventor's signature

Date

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Post Office Address

Full name of third joint inventor (given name, family name)

Inventor's signature

Date

Residence

Citizenship

Post Office Address

 Additional joint inventors are named on separately numbered sheets attached hereto.